



# The Royal Scottish Pipe Band Association

45 Washington Street, Glasgow G3 8AZ. Telephone 0141 221 5414



## FIRST TIME MEMBER REGISTRATION FORM

This form is for the use of persons who are joining the Association for the FIRST TIME OFFICIAL USE and are not already in possession of a MEMBERSHIP NUMBER.

Official Use	
New Member:	<input type="checkbox"/>
Membership Number:	.....

This form **MUST NOT** be completed by any persons who is already registered with another Band which is in membership of the Association

**As a condition of Membership, the RSPBA will process the data contained in this application form in line with their published Privacy Policies at [www.rspb.org](http://www.rspb.org)**

**Please return this form, with ALL sections fully completed in BLOCK CAPITALS to RSPBA Headquarters at the above address**

**FAILURE TO COMPLY MAY RESULT IN A BAND BEING FINED OR SUSPENDED BY THE BOARD OF DIRECTORS**

Title     Surname

Forenames

Street No. / Apt. No. or House name

Street

City / Town

Post Code       D.o.B. (DDMMYYYY)

Band  Grade

RSPBA Branch  Date

Band Secretary's Signature \_\_\_\_\_

Please tick appropriate box:

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
P/M	P/M Ass.	Piper	L/DR	Drummer	Tenor Drummer	Bass Drummer	D/M	Secretary	Committee